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CONFIRMATION NO. 4788

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/090,705	03/05/2002	604	4148	J504-005 US	
APPLICANTS Peter Michalos, Southampton, NY; Arie Michalos, Southampton, NY; ** CONTINUING DATA ***** NO KJ ** FOREIGN APPLICATIONS ***** NO KJ ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 03/26/2002					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KENDRA L JONES/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance KJ Initials	STATE OR COUNTRY NY	SHEETS DRAWINGS 2	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 3
ADDRESS NOTARO AND MICHALOS 100 DUTCH HILL ROAD SUITE 110 ORANGEBURG, NY 10962-2100 UNITED STATES					
TITLE Enhanced electronic nasolacrimal intubation					
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		